

The Five Senses - Our Reality Shapers

A mini course in understanding the connection between
our senses and our mental health

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The Five Senses shape all our experiences.
How our brains make sense of our sensations is how our minds shape reality.



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“It’s not the senses that I have, but what I do with them, that is my Kingdom.”

-- Ben Stephan

Awfulizing = fear that we use to become/make reality.

Sensations are actively constructed in our brain, ignoring some info, emphasizing others, your brain is deciding what is important.

There are five senses and all of them are about keeping us alive.

Memory associations.

Pulling information in.

Exporting information out.

The skills:

- Testing over the sense organ.
- If flunk a sense organ test – test the points associated with that organ.
- Test for regularity of the acupoint.
- Test the direction of the flow on the acupoint.
- Clockwise circles on the points till strong.
- Counter-clockwise circles on the points till strong.
- Balancing the vortexes over the sense organ if you know how to balance a Vortex.

See

“The only thing worse than being blind is having sight but no vision.” --Hellen Keller

Governed by Liver

Our eyes respond to 1/10 trillionth of the light around us.

We build a reality on 1/10 trillionth of what we see. (TED Radio Hour)

BL 1: Bright Eyes

This point serves to bring Qi and blood to the eyes and to help eye problems such as cataracts, glaucoma, night blindness, conjunctivitis and blurry vision.

BL 2: Bamboo Gathering

This point is the focus when patients complain of a headache, blurred vision, pain, tearing, redness, eye twitching, and glaucoma.

TW 23: Silk Bamboo Hole

It is thought to be a point where acupuncture can be performed to help eye and facial pain including headaches, redness, eye pain, blurred vision, eye toothache and facial paralysis, drooping eyelid.

GB 1: Pupil Bone Hole

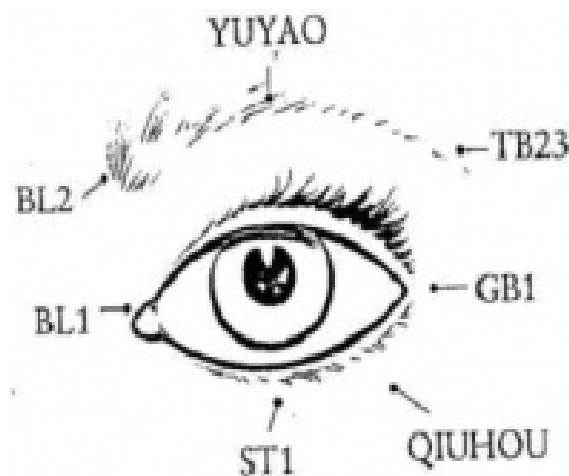
This point is thought to brighten the eyes. Manipulation of this point also helps treat headache, redness, eye pain, light sensitivity, dry eyes, cataracts, and conjunctivitis.

ST 1: Tear Container

Visual disturbances, night blindness, redness, dry eyes.

Qiuhou: eye disease such as optic neuritis, optic atrophy, pigmentary degeneration of the retina, glaucoma, early stage of cataract, myopia.

Yuyao – is the in the middle of the eyebrow right above the pupil. This point is used for treating eye strain, eyelid twitching, ptosis (upper eyelid that hangs low), cloudiness of the cornea, redness, and swelling.



“Your visual cortex takes up about 30 percent of your brain, that's compared to approximately 8 percent for touch, and 2 to 3 percent for hearing. Sight is one-third of your brain by volume, and can claim about two-thirds of your brain's processing resources. It's no surprise then that the illusion of sight is so compelling. Well, make no mistake about it, sight is an illusion. A hill appears steeper if you have just exercised, and a landmark appears farther away if you are wearing a heavy backpack. You create your own reality, and you believe it” (Lidsky).

Smell

“Trying to understand the behavior of some people is like trying to smell the Color 9.” -- Beaker, The Muppet.

Governed by Lung

LI 20 – Welcome Fragrance

Loss of smell, nasal discharge and nose or sinus issues, nasal polyps, allergies.

EX-HN 8/Shangyingxiang/Upper Welcome Fragrance –

Superior & medial to LI 20.

Opens the orifices

Resuscitates shen

EX-HN 3/Yingtang/Hall of Impression

Between the brows.

Mentally stabilizing.

Calms the spirit.

Wei Chi: Defensive Chi

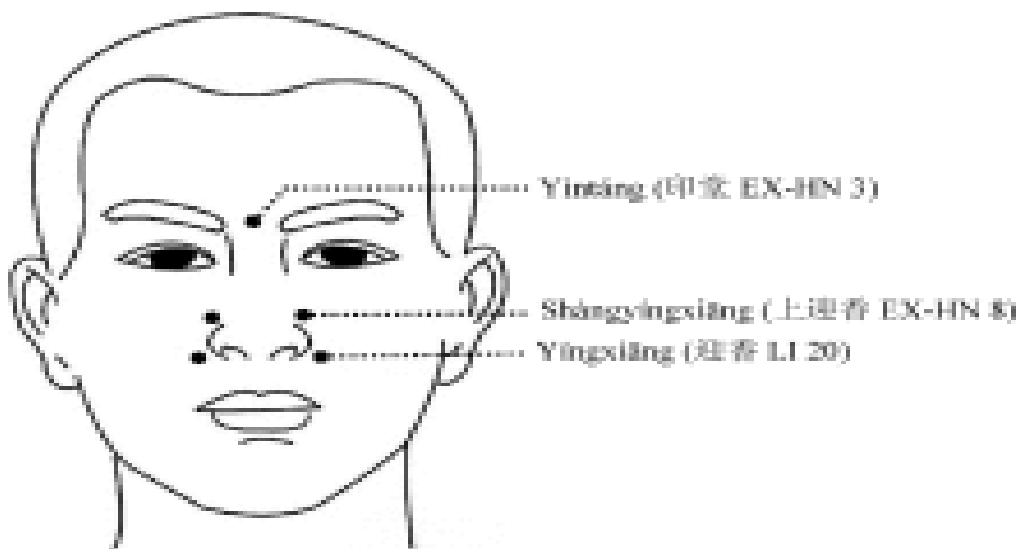
LU 1 – Central Palace

Smell sense - through the pores of the skin

Pheromones

Light touch in inside of arm from elbow to wrist

Loss of smell = anosmia



Touch

“Tell a man there are 300 billion stars in the universe and he’ll believe you. Tell him a bench has wet paint and he’ll touch it to be sure.” - George Carlin

Governed by Spleen

SP 21: Great Embrace

When this point is deficient, all joints are flaccid.

When this point is excess – pain all over the body

Palms of the hands

Latissimus Dorsi

Light touch in inside of arm from elbow to wrist

Do not receive touch... Romanian orphans... no one to hug or hold... attachment disorders... developmental delays... immune systems... touch deprivation. Only if occurred within 1st two years of life... 15 to 20 minutes of touch per day turned around the Romanian orphan.

Sensations are actively constructed in our brain, ignore some info, emphasizing others, your brain is deciding what is important...

Hard to tickle yourself... copy of the signals – suppresses those sensations.

Experience of touch is contextual.

Taste

“I think it’s clear... companies that make medicine have no idea what fruit tastes like.” – Sara Silverman

Governed by Heart

Loss of taste = Ageusia (ah-GYOO-zee-a)

Partial loss of taste = hypogeusia

Distortion of taste = dysgeusia

HT 8 - Lesser Mansion

Sores on the tongue, numbness, emotional disorders

CX 8 – Palace of Toil

Heat in mouth, tongue ulcers, cold sores, cools the blood.

Five tastes:

- Sweet
- Sour
- Bitter
- Salty
- Umani = savory or pleasant – directly translated from Japanese “pleasant savory taste”

Some Taste factoids:

Your ability to taste comes from tiny molecules released when you chew, drink, or digest food; these molecules stimulate special sensory cells in the mouth and throat. These taste cells, or gustatory cells, are clustered within the taste buds of the tongue and roof of the mouth, and along the lining of the throat. Many of the small bumps on the tip of your tongue contain taste buds. At birth, you have about 10,000 taste buds, but after age 50, you may start to lose them.

When the taste cells are stimulated, they send messages through three specialized taste nerves to the brain, where specific tastes are identified. Taste cells have receptors that respond to one of at least five basic taste qualities: sweet, sour, bitter, salty, and umami [oo-MOM-ee]. Umami, or savory, is the taste you get from glutamate, which is found in chicken broth, meat extracts, and some cheeses. A common misconception is that taste cells that respond to different tastes are found in separate regions of the tongue. In humans, the different types of taste cells are scattered throughout the tongue.

Taste cells—as well as sensory cells that help you smell—are the only sensory cells in the human body that are regularly replaced throughout life.

Scientists are gaining a better understanding of why the same receptor that helps your tongue detect sweet taste can also be found in the human gut. NIDCD-funded scientists have shown that the sweet receptor helps the intestine to sense and absorb sugar and turn up the production of blood sugar-regulation hormones, including the hormone that regulates insulin release.

On average the human tongue has 2000 to 8000 taste buds on the tongue and oral cavity. Within each taste bud there are approximately 50 to 100 taste cells, and these tongue taste cells are the initial chemosensors of the alimentary tract (Trivedi).

Eating a food that we enjoy can trigger powerful memories of pleasure, lust, and even love. However, all it takes is one bad oyster in a meal, and a night over the toilet bowl to make you avoid eating oysters for the rest of your life. Neuroscientists who specialize in the study of taste are only now just beginning to comprehend how and why the interaction of a few chemical molecules that stimulated taste buds on your tongue can trigger instinctive behavior or intense memories (Gordon).

Taste is a chemical process: Sweetness sensors react to sugar molecules. This relates to food with high caloric energy value. Sourness measures pH because humans have an aversion to acidic foods because they could be spoiled. Saltiness measures positive ions in alkali metals, in particular sodium, because of our need for mineral salt. Umami, the savory meaty taste, is detected by a receptor for glutamate. This detects protein. Bitterness is poorly defined. It may be an umbrella term for various chemical reactions that are toxic because many dangerous compounds are bitter, although not all bitter foods are toxic (Getchell).

Studies have shown that the five tastes, except sour, have distinctive regional representations on the gustatory cortex. Those studies also say while bitter and sweet receptors are intermingled on the tongue, they are separated by 2.5 millimeters in the brain. This could span hundreds of neurons. The brain is probably wired this way so that bitter resides in a region that drives aversion, and sweetness in an area of attraction (*yes, the science of mating – emphasis and footnote mine*). The important thing about this topographical segregation is that the encoding of taste signals can drive aversive and attractive behaviors (Gordon).

Hear

“I can’t hear you – so I’ll just laugh and hope it wasn’t a question.”
- Bumper Sticker

Governed by Kidney

GB 8: Leading Valley

Benefits ear and subdues Liver Yang in the head.

ST 7: Below the Joint

Deafness, tinnitus, ear pain, ear discharge/infections, TMJ point.

BL 23: Kidney Shu

Chronic ear infections, tinnitus, deafness

TW 21: Ear Gate

Ear problems of excess or deficiency, tinnitus, earache

TW 17: Wind Screen

Wind problems deriving from either internal or external source

Acute hearing, deafness, tinnitus.



Addendum:

Scalp acupuncture

By Jin Trip, DOM - www.Jintrip.com

History

- Scalp acupuncture has been in use for the last 30 years.
- Using modern brain mapping, reflex zones on the scalp influence motor, sensory, and functional regions of the brain.
- In this way, **specific areas of the body can be targeted and CNS (Central Nervous System) pathologies** can be treated (occasionally with mild electrical currents)

Indications

- Disorders of the central nervous system
- Stroke or brain damage
- Acute and chronic pain
- Motor and/or sensory nerve deficiency (paralysis, numbness)
- Psychosomatic disorders (dementia, developmental disorders)
- Vestibular disorders (poor balance, vertigo)

Anatomy

- The soft tissue of the scalp is divided into five layers:
- **Skin**, (subcutaneous)
- **Connective tissue**,
- **Aponeurosis** (galea)
- **loose areolar tissue**
- **pericranium**
- The **loose areolar tissue** is optimal for scalp needling, as the needle glides smoothly, causes little pain.
- **It is important to angle the needle correctly relative to the location** over the scalp to penetrate the optimal layer of tissue.

Note: Needles are used by licensed acupuncturists. This is for reference only.

Figure 1: Primary Centers of the Cerebral Cortex

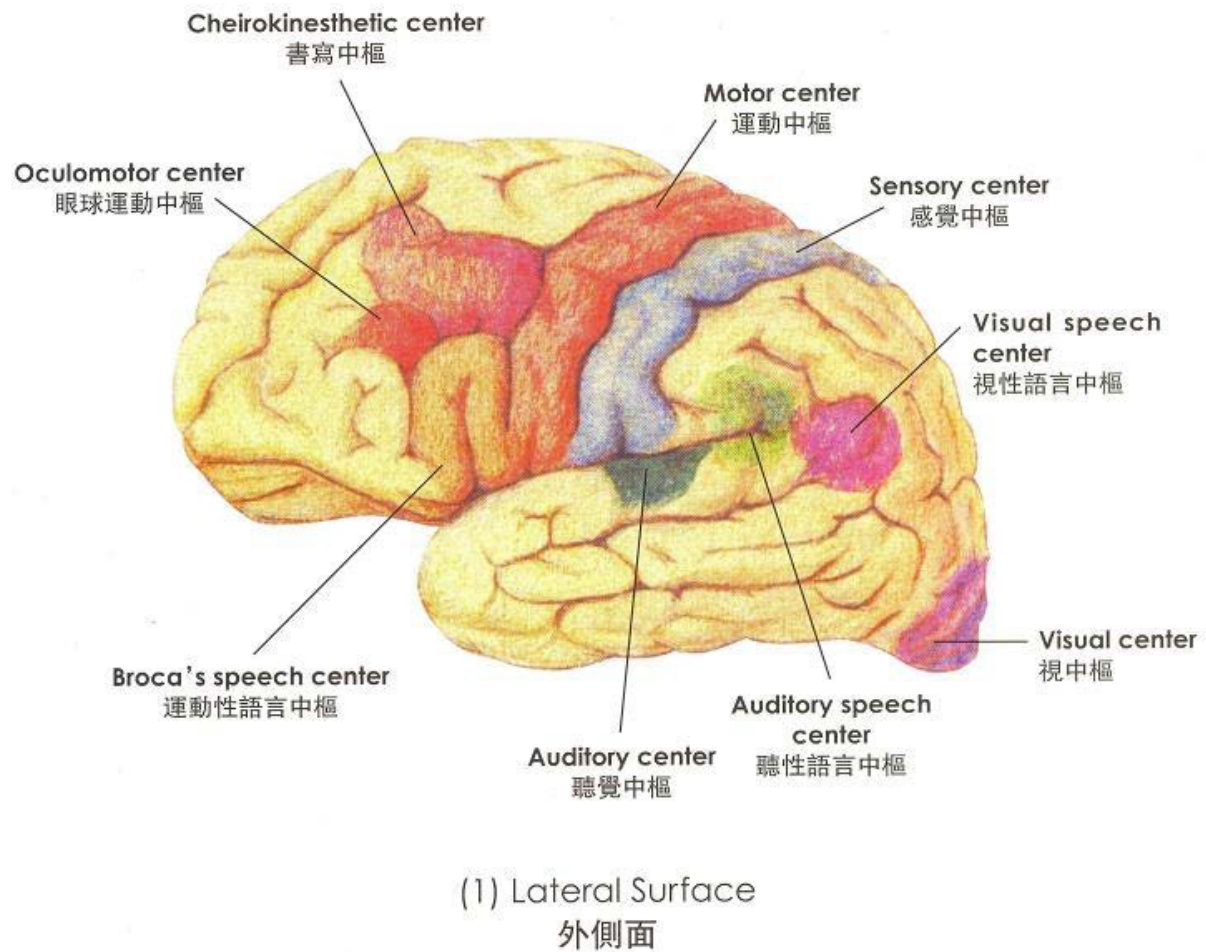


Fig. 1 Primary Centers of the Cerebral Cortex
大腦皮層的重要中樞圖

Scalp Anatomy

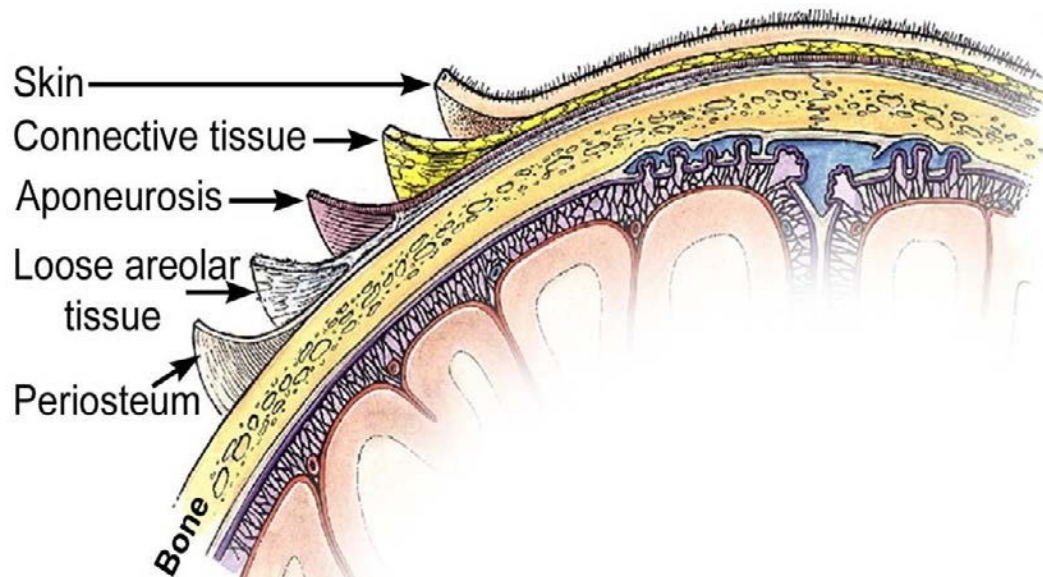
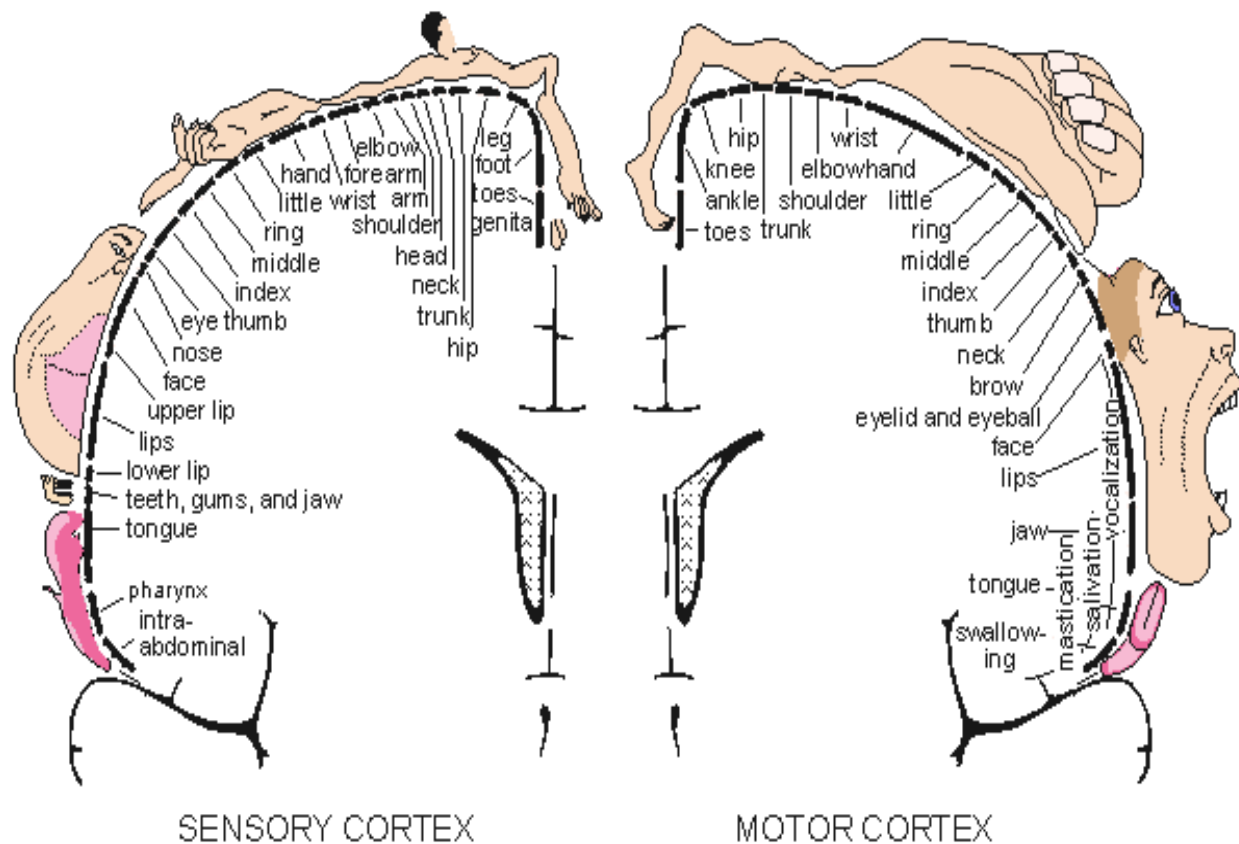


Fig 7.18 Grant's Atlas of Anatomy 12th Ed. LW&W, 2009

Sensory and Motor Cortex



Standard Scalp Lines

- The Scientific Group considered the scalp acupuncture lines as well as the underlying functional zones of the brain.
- It proposed the following nomenclature, using the alphabetic code MS (derived from “micro- system” and “scalp point”).
- MS1 to MS14

Figure 4: Frontal Region

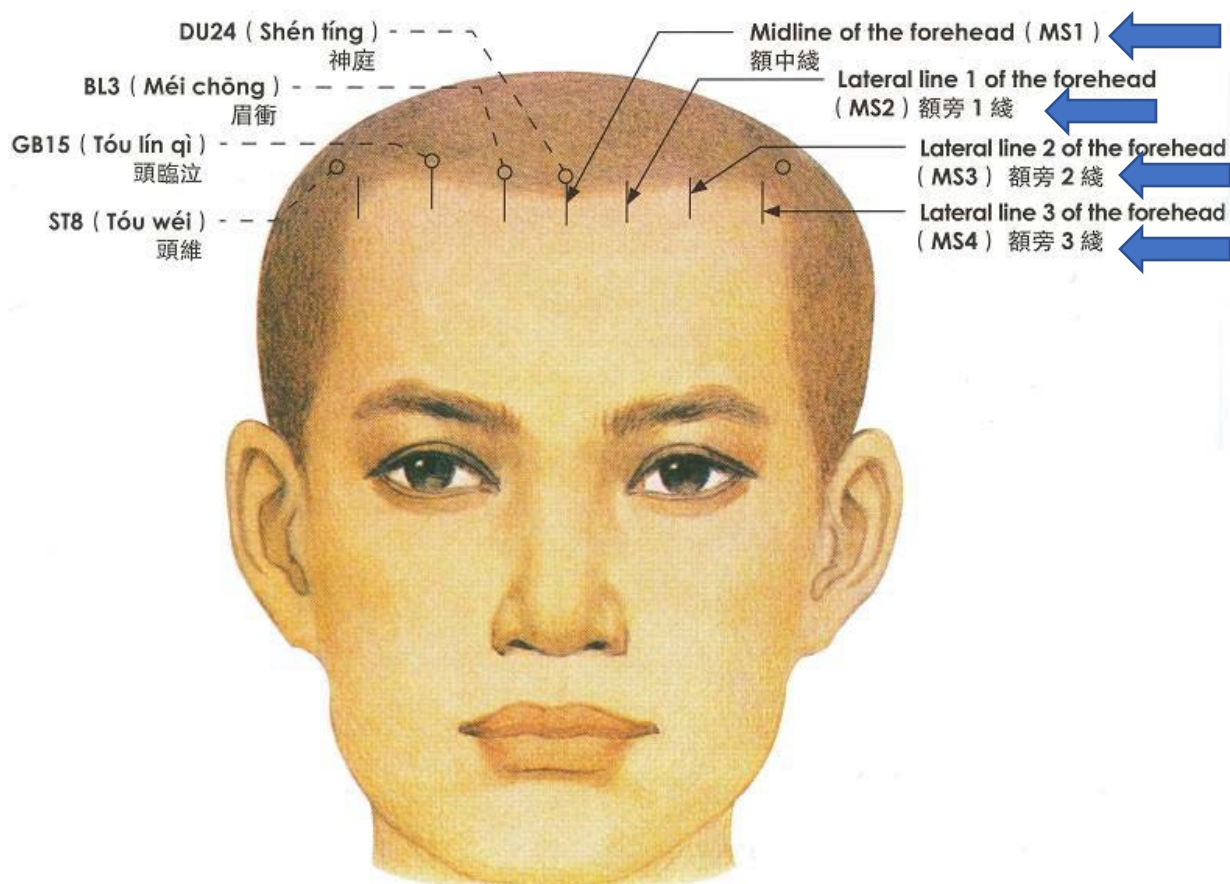


Fig. 4 Frontal Region
頭針穴綫（額區）圖

Figure 5: Parietal Region

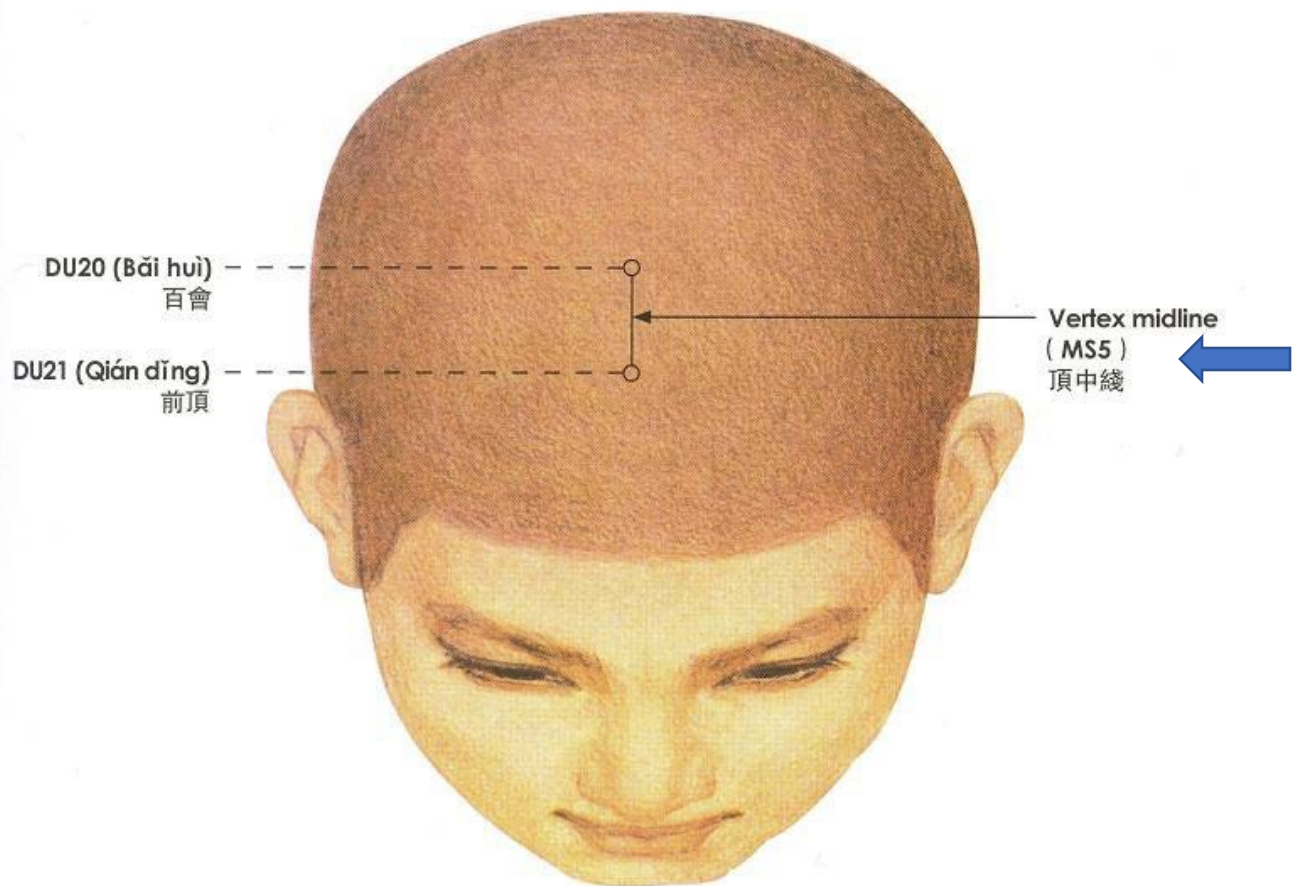


Fig. 5 Parietal Region
頭針穴綫（頂區）圖

Figure 6: Parietal Temporal Region (Side View 1)

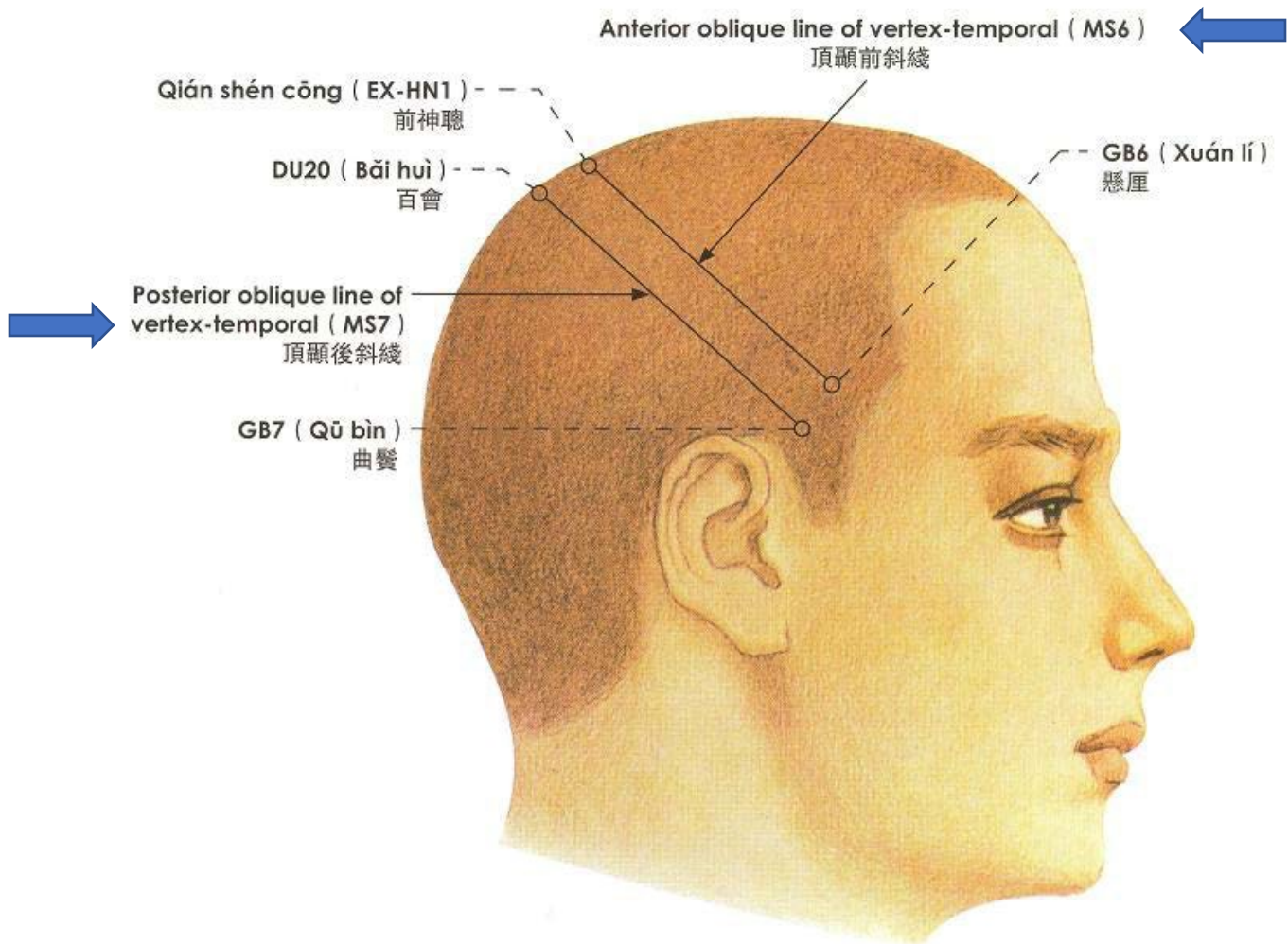


Fig. 6 Parietal Temporal Region
頭針穴綫（頂顳區）圖

Figure 7: Parietal Temporal Region (Side View 2)

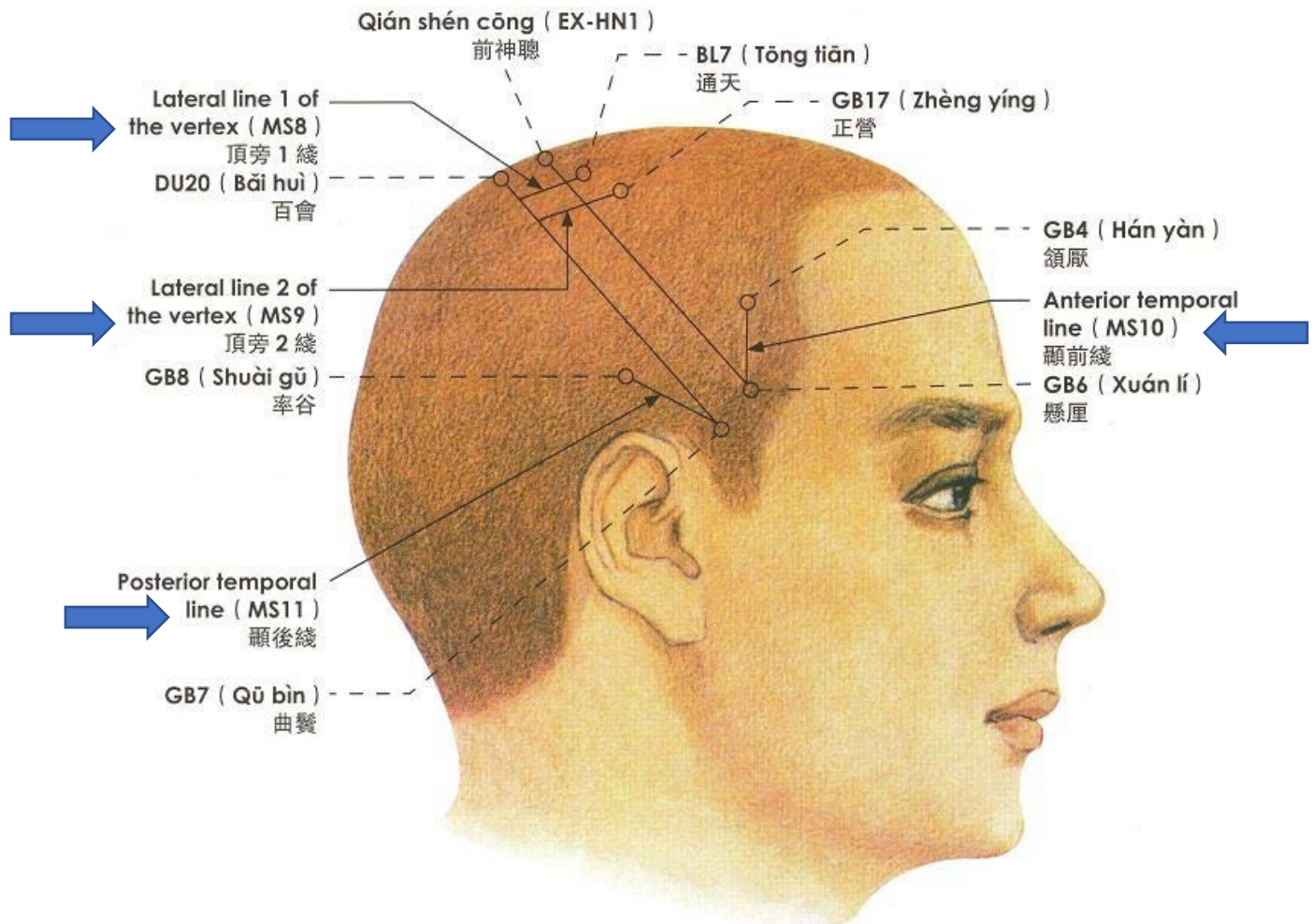


Fig. 7 Parietal Temporal Region
頭針穴綫（頂顳區）圖

Figure 9: Occipital Region

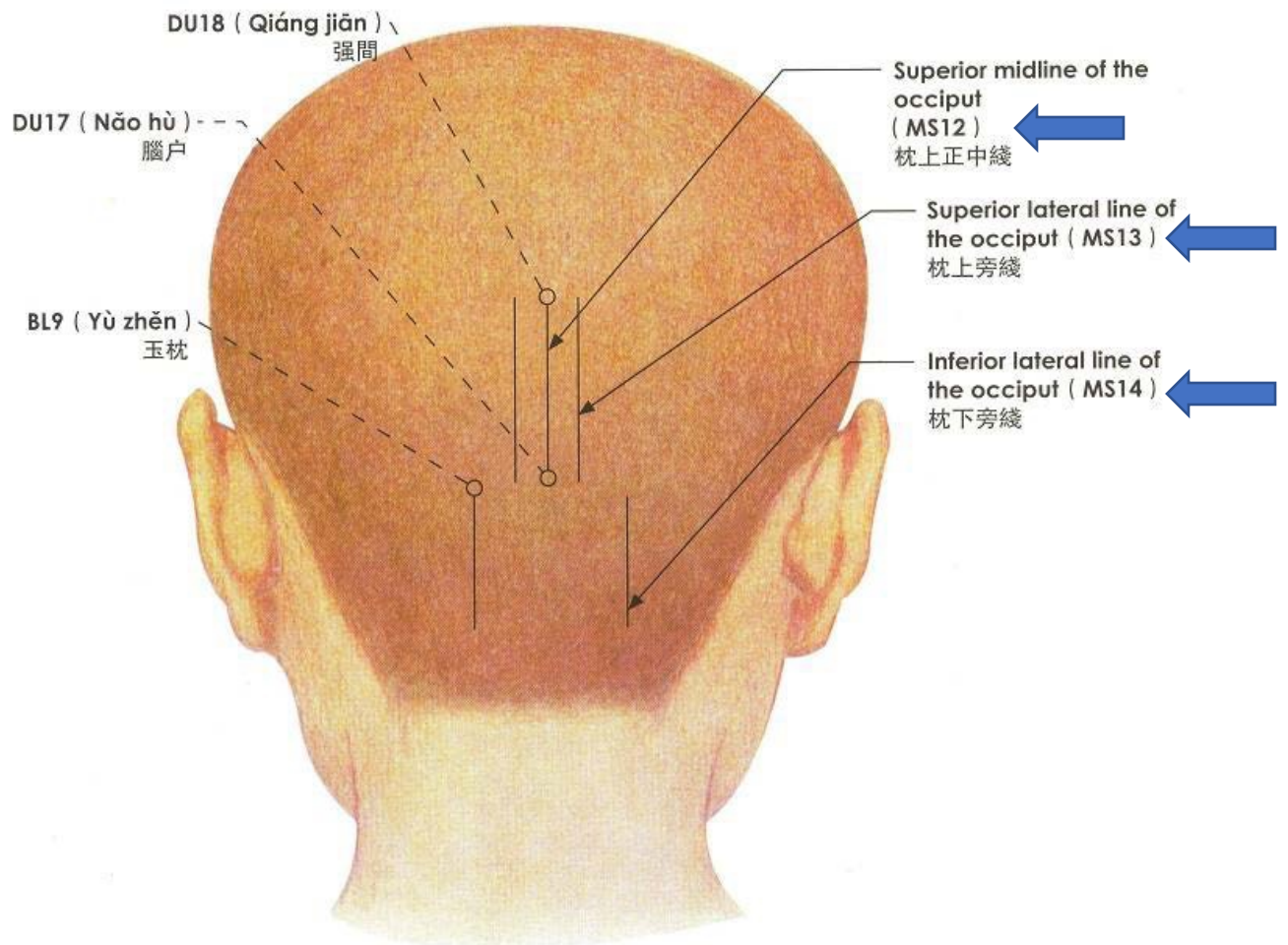


Fig. 9 Occipital Region
頭針穴綫（枕區）圖

Table 1: Standard Scalp Lines

Figure	Micro-System	Name	Location	Indications
Figure 4: Frontal Region				
4	MS1	Middle Line of Forehead	1 cun line downward from Du 24	Du channel: Unconsciousness, diseases of the head, nose tongue, and throat
4	MS2	Lateral Line 1 of Forehead	1 cun line downward from BL 3	UB channel: Diseases of the pulmonary bronchi and heart
4	MS3	Lateral Line 2 of Forehead	1 cun line downward from GB 15	GB channel: Diseases of the Spleen, Stomach, Liver, and Gallbladder
4	MS4	Lateral Line 3 of Forehead	1 cun line downward from the point 0.75 cun medial to ST 8	GB and St channels: Diseases of the Kidney and genito-urinary system
Figure 5: Parietal Region				
5	MS5	Middle Line of Vertex	On the vertex, the line jointing Du 20 and 21	Du channel: Diseases of the lumbar and foot (such as paralysis, numbness),
Figure 6: Parietal Temporal Region (Side View 1)				
6	☆MS6	Anterior Oblique Line of Vertex-Temporal	On the vertex and temporal region, the line from Qiang (front) Shen Cong to GB 6, divided into 5 equal parts	Upper 1/5: functional-motor disorders of the lower limbs Middle 2/5: motion d/o of the upper limbs Lower 2/5: motion d/o of the face
6	☆MS7	Posterior Oblique Line of Vertex-	The line from Du 20 to GB 7, divided into 5 equal parts	Upper 1/5: paresthesia of lower limbs Middle 2/5: paresthesia of upper limbs Lower 2/5: paresthesia of face and head

Figure	Micro-System	Name	Location	Indications
Figure 7: Parietal Temporal Region (Side View 2)				
7	MS8	Lateral Line of Vertex 1	1.5 cun lateral to the Du channel, 1.5 cun line backward from BL7, connecting the motor and sensory lines	Motor-sensory d/o of the lower limbs, Paralysis, numbness, and pain of the lower leg and loin
7	MS9	Lateral Line of Vertex 2	2.25 cun lateral to the Du channel, 1.5 cun line backward from GB 17-18	Motor-sensory d/o of the upper limbs, Paralysis, numbness, and pain of the shoulder, arm, and hand
7	MS10	Anterior Temporal Line	The line connecting GB 4-6	Temporal nerve: migraine, peripheral facial paralysis
7	MS11	Posterior Temporal Line	The line connecting GB 7-8	Temporal nerve: migraine, peripheral facial paralysis
Figure 6: Occipital Region				
9	MS12	Upper Middle Line of Occiput	The line connecting Du 18-17	Eye disease, lumbago
9	MS13	Upper Lateral Line of Occiput	The line 0.5 cun lateral to Du 18-17	Cortical nerve: visual disturbances, cataracts, near-sightedness
9	MS14	Lower Lateral Line of Occiput	2 cun line downward from UB 9	Balance disturbance due to cerebrum injury, nape pain, and occipital headache

Cautions:

- Use gentle stimulus with e-stim
- Do not use on patients with very high blood- pressure (220/120)
- Local infection
- On infants whose fontanels have not yet closed
- May induce miscarriage

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About Sara Allen, PhD, EEM-AP...

Dr. Sara is a doctorate level holistic health practitioner. She has studied extensively food as medicine as well as supplemental & herbal medicine. Her specialty is a particular self-brand of energy medicine – best described as a combination of ancient Chinese and East Indian modalities that are systematized via energy kinesiology. She is deeply skilled in Eden Energy Medicine, Pranic Healing, Touch for Health, EFT, Advanced Psych-K, Animal Energy Medicine, and she just cannot stop talking about the fascinating world of German New Medicine.

Dr. Sara is a certified trainer in Leadership Effectiveness Training, better known by its acronym L.E.T., with Gordon Training International. LET is a Rogerian based system of communicating and understanding the complex world of feelings and needs. It is a beautiful and versatile tool that enables practitioners to gently tease out and discern the root emotions causing conflicts within the psyche and in relationships. Dr. Allen also teaches LET skills in the corporate world to ease conflict and enhance productivity in the workplace. She also teaches P.E.T. – Parent Effectiveness Training to anyone raising humans. PET teaches skills to parents and children to create peace, cooperation and individuation between parents and the children who are raising them.

Dr. Sara has a private energy medicine practice in Asheville, NC. She is senior/founding faculty at the Eden Energy Medicine School. Dr. Sara also sits on faculty at the European Energy Medicine School in London. She is the Educational Director for the Central Region Eden School in Chicago and runs the Eden Fundamentals Program in Asheville, NC.

Dr. Sara's training, and over 20,000 hours of clinical experience, have resulted in a masterful blend of skill and intuitive understanding of the client's needs. She also understands the practitioner's needs. As a result, she is in high demand as a mentor to the advanced energy medicine student. Her experience and success create outstanding classroom experiences for both the novice and advanced student/practitioner.

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